Revised 03/06 WDNY

## UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

# FORM TO BE USED IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § ()83

(Prisoner Complaint Form)



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1. CAPTION OF ACTION

Full Name And Prisoner Number of Plaintiff: NOTE: If more than one play

pauperis status, each plaintiff must submit an in forma pauperis application and a signed solverization or the

considered will be the plaintiff who filed an application	n and Authorization.		NOV 1 0 2010
1. Martin Johnson	10A0687		(CL
2		N.	STERN DISTRICT OF IN
	-VS-		
B. Full Name(s) of Defendant(s) NOTE: P The court may not consider a claim against anyone no you may continue this section on another sheet of paper 1. NEW JORK STATE DO CORECTSON 3. NO NOSON CORECTSON WEW YORK STATE	ot identified in this sec er if you <u>in</u> dicate belo DCT 4.	ction as a defendant. If y ow that you have done so	you have more than six defendants,
2. STAT	TEMENT OF JUR	ISDICTION	
United States. This action is brought pursuant to 28 U.S.C. §§ 1331, 1343(3) and (4), and 2201.			ction over the action pursuant to
<u>3. PA</u>	RTIES TO THIS	<u>ACTION</u>	
PLAINTIFF'S INFORMATION NOTE: To li Name and Prisoner Number of Plaintiff:	<b>\ \ \ \</b>	s, use this format on and	
Present Place of Confinement & Address:	th foot Cope	ectional facili	ly 236 Bob MASIA DOSVE
Name and Prisoner Number of Plaintiff:			
Present Place of Confinement & Address:			A STATE OF THE STA

<b><u>DEFENDANT'S INFORMATION</u></b> NOTE: To provide information about more defendants than there is room for here, use this
format on another sheet of paper.
Name of Defendant: \( \lambda \) \( \lambda \) \( \lambda \)
(If applicable) Official Position of Defendant: (SOLECTION UTLICE)
(If applicable) Defendant is Sued in Individual and/or Official Capacity
Address of Defendant: Down State Correction at FACILITY BOX + RED School house ROAD FISHIS! NEWYORK 12524-0445
School house ROAD FISH !! NEWYORK 1757-4-0445
Name of Defendant: N Sohn 500
(If applicable) Official Position of Defendant: Correction Officer
(If applicable) Defendant is Sued in Individual and/or Official Capacity
Address of Defendant: Down State Coprectional FACILITY BOX F RED
School house ROAD HISKELL, N.Y. 12524-0445
20.1000 10.000
Name of Defendant: H RICEN DERG
(If applicable) Official I osition of Berendant.
Total O consider Al Marchel David Soland
Address of Defendant: Down StAFE CORRECTIONAL FACE LITY BOX F 120 SCHOOL PRINKELL N. V. 12524-0445
Mase Rotto I Mistilly 11.7. 100 I
Hnd (2) two other John Joes
A PROMONOL ANGUATO IN CTATE AND EFDEDAL COURT
4. PREVIOUS LAWSUITS IN STATE AND FEDERAL COURT
A. Have you begun any other lawsuits in state or federal court dealing with the same facts involved in this action?  Yes No
If Yes, complete the next section. NOTE: If you have brought more than one lawsuit dealing with the same facts as this
action, use this format to describe the other action(s) on another sheet of paper.
1. Name(s) of the parties to this other lawsuit:
Plaintiff(s):
Defendant(s):
Court (if federal court, name the district; if state court, name the county):
3. Docket or Index Number:
4. Name of Judge to whom case was assigned:

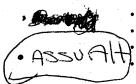
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5.	The approximate date the action was filed:
6.	What was the disposition of the case?
	Is it still pending? YesNo
	If not, give the approximate date it was resolved.
	Disposition (check the statements which apply):
	Dismissed (check the box which indicates why it was dismissed):
	By court sua sponte as frivolous, malicious or for failing to state a claim upon which relief can be granted;
	By court for failure to exhaust administrative remedies;
	By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
	By court due to your voluntary withdrawal of claim;
	Judgment upon motion or after trial entered for
	plaintiff
	defendant.
В.	Have you begun any other lawsuits in federal court which relate to your imprisonment?
200	Yes No
If Yes.	, complete the next section. NOTE: If you have brought more than one other lawsuit dealing with your imprisonment,
use th	is same format to describe the other action(s) on another sheet of paper.
1.	Name(s) of the parties to this other lawsuit:
	Plaintiff(s):
	Defendant(s):
2.	District Court:
3.	Docket Number:
4.	Name of District or Magistrate Judge to whom case was assigned:
5.	The approximate date the action was filed:
6.	What was the disposition of the case?
	Is it still pending? Yes No
	If not, give the approximate date it was resolved.

Disposition (check the statements which apply):		
 Dismissed (check the box which indicates why it was	s dismissed):	
By court sua sponte as frivolous, maliciou upon which relief can be granted;	as or for failing to state a clair	<b>n</b>
By court for failure to exhaust administrat	ive remedies;	
By court for failure to prosecute, pay filing	ng fee or otherwise respond t	to a court
By court due to your voluntary withdrawa	l of claim;	
 Judgment upon motion or after trial entered for		
plaintiff		
defendant.		

#### 5. STATEMENT OF CLAIM

For your information, the following is a list of some of the most frequently raised grounds for relief in proceedings under 42 U.S.C. § 1983. (This list does not include <u>all</u> possible claims.)



- Religion
- Free Speech
   Due Process

Equal Protection

- Access to the Courts
- False Arrest
   Excessive Force
- Failure to Protect
- Search & Seizure
- Malicious Prosecution
- Denial of Medical Treatment
- Right to Counsel

Please note that it is not enough to just list the ground(s) for your action. You must include a statement of the facts which you believe support each of your claims. In other words, tell the story of what happened to you but do not use legal jargon.

Fed.R.Civ.P. 8(a) states that a pleading must contain "a short and plain statement of the claim showing that the pleader is entitled to relief." "The function of pleadings under the Federal Rules is to give fair notice of the claim asserted. Fair notice is that which will enable the adverse party to answer and prepare for trial, allow the application of res judicata, and identify the nature of the case so it may be assigned the proper form of trial." Simmons v. Abruzzo, 49 F.3d 83, 86 (2d Cir. 1995). Fed.R.Civ.P. 10(b) states that "[a]ll averments of claim ... shall be made in numbered paragraphs, the contents of each of which shall be limited as far a practicable to a single set of circumstances."

#### **Exhaustion of Administrative Remedies**

Note that according to 42 U.S.C. § 1997e(a), "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prison er confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

You must <u>provide information</u> about the extent of your efforts to grieve, appeal, or otherwise exhaust your administrative remedies, and you must <u>attach copies</u> of any decisions or other documents which indicate that you have exhausted your remedies for each claim you assert in this action.

A. FIRST CLAIM: On (date of the incident) 3-22-10 7:20 Am
defendant (give the name and position held of each defendant involved in this incident) NLOPEZ N
Johnson Andrikscenberg All of which ARE Correction Officer's
and (2) two other male John DOE's to which ARE CORRECTION Officer's
did the following to me (briefly state what each defendant named above did): 121CEN berg And A tew
other male officer's held me down and let officer's N
LOPEZ And N Johnson DEAT my leg's with those belly Club Sticks
Whole laughing REMEMBER Downstate was well
AWARE of my being an Already handicap man because I came to
down state on crutches and/or come on 2-12-10 so why malicious
ASSAULT SOMEONE Who'S hand?CAP
The constitutional basis for this claim under 42 U.S.C. § 1983 is: CONE MARCOUS And intentional days of the Eighth Amendment Claim
The relief I am seeking for this claim is (briefly state the relief sought): ONE hundred mellion
Exhaustion of Your Administrative Remedies for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what was the result? DENCE DENCE
Did you appeal that decision? Yes No If yes, what was the result?
Attach copies of any documents that indicate that you have exhausted this claim.
If you did not exhaust your administrative remedies, state why you did not do so: 2 greated the issue to superint-
Endent and Dep. of security to try and resolve this diplematicly and they
Simply Return gresvance saying NO"
A. SECOND CLAIM: On (date of the incident) 3.72.10 7:20 Am
defendant (give the name and position held of each defendant involved in this incident)
Johnson, PicEn berg and a few other MALE officer's

### 

did the following to me (briefly state what each defendant named above did):	
The constitutional basis for this claim under 42 U.S.C. § 1983 is:	
The relief I am seeking for this claim is (briefly state the relief sought):	
Exhaustion of Your Administrative Remedies	for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what	
Did you appeal that decision? Yes No If yes, what was the	e result?
Attach copies of any documents that indicate that you ha If you did not exhaust your administrative remedies, state why you did not do	
If you have additional claims, use the above format and set the	em out on additional sheets of paper.
6. RELIEF SOUGHT	
Summarize the relief requested by you in each staten	nent of claim above.
Do you want a jury trial? Yes No	

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I declare under penalty of perjury that the foregoing is true and correct.							
Executed or	n 5-4-10	<u> </u>					
		(date)					o
NOTE: Ed	ich plaintiff must sign	this complaint and m	ust also sign all	subsequent po	ipers filed with	h the Court.	
			MARtan	Johnso	^		
							\$
			Signa	ture(s) of Plair	ntiff(s)		